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SERIAL NUMBER 10/723,181	FILING OR 371(c) DATE 11/26/2003 RULE	CLASS 358	GROUP ART UNIT 2625	ATTORNEY DOCKET NO. P0976		
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<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/430,014 11/28/2002 and claims benefit of 60/440,593 01/15/2003 and claims benefit of 60/466,926 04/30/2003 and claims benefit of 60/475,389 06/02/2003 and is a CIP of 10/165,751 06/06/2002 PAT 6,754,377 which is a CON of 09/074,034 05/06/1998 PAT 6,449,377 This application 10/723,181 is a CIP of 10/012,703 12/07/2001 PAT 6,744,906 which is a CON of 09/433,104 11/03/1999 PAT 6,636,615 which is a CIP of 09/234,780 01/20/1999 ABN which claims benefit of 60/071,983 01/20/1998 This application 10/723,181 is a CIP of 09/898,901 07/02/2001 PAT 6,721,440						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/25/2004</b>						
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	STATE OR COUNTRY OR	SHEETS DRAWING 13	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 4
<b>ADDRESS</b> 23735						
<b>TITLE</b> Automated methods for distinguishing copies from original printed objects						
FILING FEE RECEIVED 1004	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____		